



Atty. Docket No. INN03 P301

CERTIFICATE OF MAILING

I hereby certify that this paper, together with all enclosures identified herein, are being deposited with the United States Postal Service as first class mail, addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, Virginia 22313-1450, on the date indicated below.

Feb. 14, 2005

Date

Kimberley J. Cousineau  
Kimberley J. Cousineau

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 3671  
Examiner : Batson, Victor D.  
Applicant : Kai S. Lee  
Appln. No. : 10/620,993  
Filing Date : July 16, 2003  
Confirmation No. : 8834  
For : COUNTER-ROTATING TWIN SHAFT SYSTEM FOR GARDENING MACHINES

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Transmitted herewith are a Return Postcard, Response (15 pgs), and Check in the amount of \$400 in the above-identified application.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity		
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee	
Total Claims	38	Minus	51	= 0	x \$25	\$0.00	X \$ 50	\$0.00	
Independent Claims	7	Minus	3	= 4	x 100	\$400	X \$200	\$0.00	
First Presentation of Multiple Dependent Claims \$180							\$0.00	X \$360	\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT							\$400		\$0.00

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Each Additional Group of 50 Pages That Exceeds 100 Pages

Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
No. of Groups Remaining After Amendment		Highest No. of Groups Previously Paid For	Present Extra Groups	Rate (each add'l 50 pages over 100)	Add'l Fee	Rate (each add'l 50 pages over 100)	Add'l Fee
1	Minus	2	= 0	x \$125	\$0.00	X \$250	\$0.00

1.  Small entity status of this application 37 CFR §§1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
2.  No additional fee is required.
3.  A fee of \$400 to cover the cost of the additional claims added by this response is enclosed.
4.  A fee of \$\_\_\_\_ to cover the application size fee is enclosed.
5.  Please charge any additional fees or credit overpayment to Deposit Account No. 16 2463. A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER,  
DEWITT & LITTON, LLP



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(616) 949-9610

Dated: February 16, 2005

BEA:kjc



*JFN*

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Dear Sir:

REPLY UNDER 37 C.F.R. §1.111

**Amendments to the claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 14 of this paper.

02/23/2005 CCHAU1 00000045 10620993  
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